



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E443959**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

CASE #	15-01806		
LOCAL AGENCY CODING	0664		
TOTAL # OF UNITS	02	OBJECT STRUCK	

TRIBAL RESERVATION	
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DATE OF COLLISION	07 - 18 - 2015	TIME (2400)	1707	COUNTY #	31	MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	IN OF	<input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>	
LUNDEEN PARWAY		BLOCK NO.	
		MILE POST	

DISTANCE		MILES		OF (REFERENCE OR CROSS STREET)	STATE ROUTE 9
		FEET			

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	
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LAST NAME	UNKNOWN	FIRST NAME		MIDDLE INITIAL	
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STREET	
NEW ADDRESS	

CITY		ST		ZIP	
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #		STATE		SEX	U	D.O.B.			
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	9	RESTR.	9	EJECT	1	HELMET USE		INJURY CLASS	0	NATURE OF INJURIES	
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LICENSE PLATE #	APT3027	STATE	WA	VIN#	5GTDN13E778115571
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2007	MAKE	HUMM	MODEL	HUM4D	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. ROBERT SIMON 11233 26 AVE SE EVERETT WA 98298											
--	--	--	--	--	--	--	--	--	--	--	--

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	
VEHICLE LEGALLY EXEMPTED <input type="checkbox"/>	CITATION #	CHARGE



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 3609133364
---------	---	--------------------------------------	-------------------------------------	---	--	-------	---------------

LAST NAME	AVALOS	FIRST NAME	FERNANDO	MIDDLE INITIAL	C
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STREET	
NEW ADDRESS	2506 HARTFORD DR #3

CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	AVALOF*253KD	STATE	WA	SEX	M	D.O.B.	05		04		1975
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES	SORE BACK
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LICENSE PLATE #	APP9358	STATE	WA	VIN#	3VWSA29MXYM192749
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
-----------------	--	-------	--	-----------------	--	-------	--

VEH. YEAR	2000	MAKE	VOLK	MODEL	JETTA	STYLE	SD	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
-----------	------	------	------	-------	-------	-------	----	---	----------	--	---

REGISTERED OWNER INFO. OWNED BY DRIVER											
--	--	--	--	--	--	--	--	--	--	--	--

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 987206004 EXP: 8-19-15
VEHICLE LEGALLY EXEMPTED <input checked="" type="checkbox"/>	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	ROBERT MINER	BADGE OR ID #	095	AGENCY	WA0311900
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PAGE 01 OF 3	
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E443959**

CASE # **15-01806**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		VELAZQUES SARA T																	
ADDRESS & PHONE #		2506 HARTFORD DR #3 LAKE STEVENS WA 98258										SEX	F	D.O.B. MMDDYYYY	10	-	21	-	1988
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	0	NATURE OF INJURIES PREGNANT-AID DECLINED	
NAME (LAST, FIRST, MIDDLE INITIAL)		AVALOS JAMIE																	
ADDRESS & PHONE #		2506 HARTFORD DR #3 LAKE STEVENS WA 98258										SEX	F	D.O.B. MMDDYYYY	07	-	04	-	2007
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	9	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		MERRILL NATASHA R																	
ADDRESS & PHONE #		12016 29 PL NE LAKE STEVENS WA 98258 4256288700										SEX	F	D.O.B. MMDDYYYY	07	-	09	-	1982
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

Unit #2 was stopped at the red light on Lundeen at SR 9 in the straight through lane to continue on Lundeen. Witness was stopped at the redlight on Lundeen at SR 9 in the left turn lane, directly to the left of Unit #2. Unit #1 was westbound on Lundeen approaching the red light at SR 9. Unit #1 rear ended Unit #1. Immediately following the collision, the female driver of Unit #1 backed up and fled the scene northbound on SR 9 fialing to stop and exchange info with Unit #2. As of completing this report, 7-19-15, I have not been able to locate the hit and run vehicle along with its driver. This case is active.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

ROBERT MINER

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

07-19-15 01:40 PM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

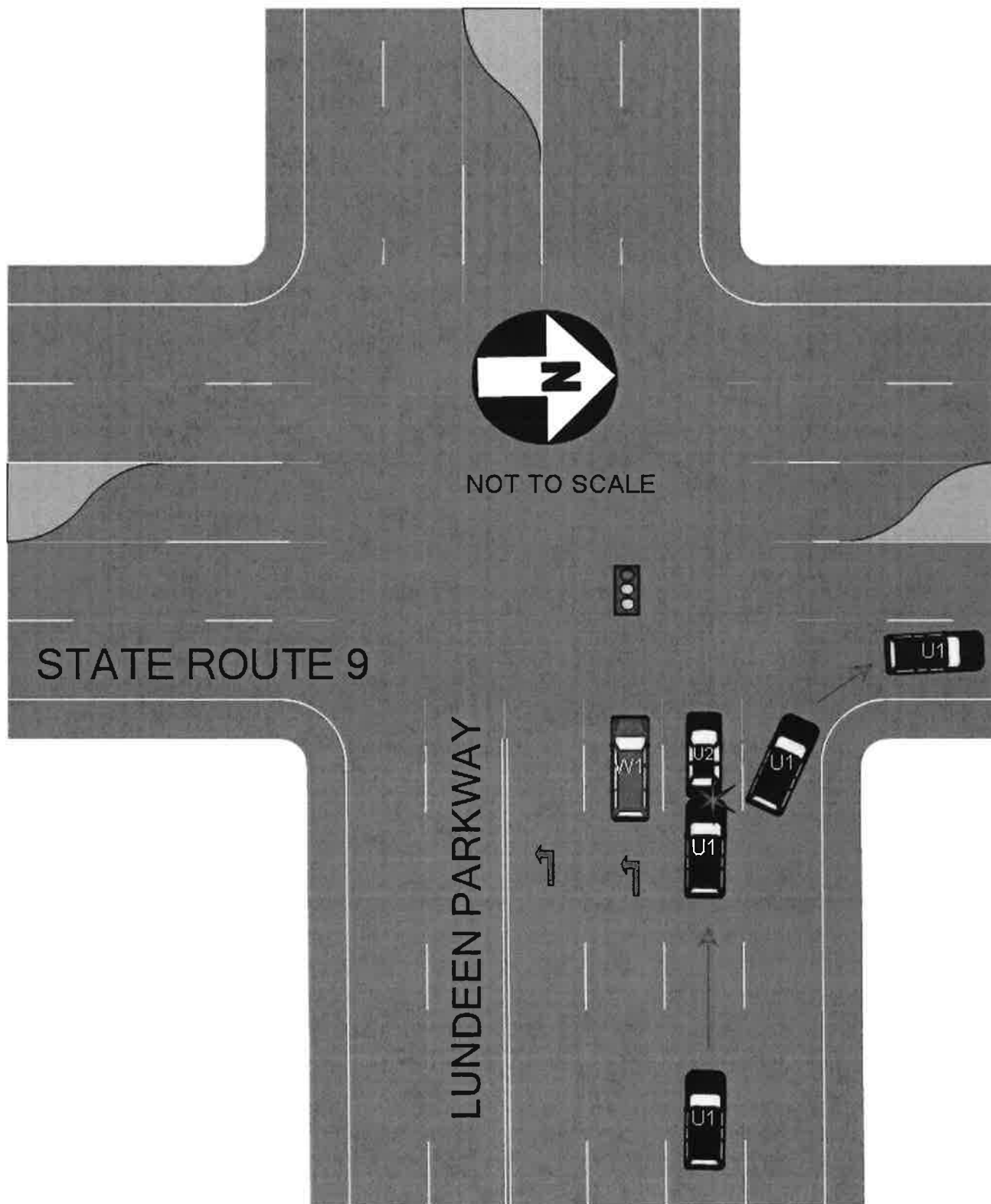
7/19/2015 1:40:36 PM

BADGE OR ID # **095**

ORI # **WA0311900**

TIME POLICE DISPATCHED **5:08 PM**

TIME POLICE ARRIVED **5:10 PM**



9081-51
15-1806



15-1806



LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>mines</i>		Case Number <i>15-1806</i>	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: <i>Collision</i>		Date/Time: <i>7/14/15</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfkgs will be held for 60 days or 60 days past owner notification			

Case #

Item # Action #	1	Item <i>CD</i> Brand Name <i>Canon</i> Brand/Model/Caliber (Further Description) <i>Sony Photos</i>	Storage Location	Disposition
	3	Serial # Where Found Weight of Narcotic		
	Owner's Name Address City State Zip Phone #			
	Owner Signature/Other remarks /additional information/ special instructions			
Item # Action #		Item Brand Name Brand/Model/Caliber (Further Description) Serial # Where Found Weight of Narcotic	Storage Location	Disposition
		Serial # Where Found Weight of Narcotic		
	Owner's Name Address City State Zip Phone #			
	Owner Signature/Other remarks /additional information/ special instructions			
Item # Action #		Item Brand Name Brand/Model/Caliber (Further Description) Serial # Where Found Weight of Narcotic	Storage Location	Disposition
		Serial # Where Found Weight of Narcotic		
	Owner's Name Address City State Zip Phone #			
	Owner Signature/Other remarks /additional information/ special instructions			
Item # Action #		Item Brand Name Brand/Model/Caliber (Further Description) Serial # Where Found Weight of Narcotic	Storage Location	Disposition
		Serial # Where Found Weight of Narcotic		
	Owner's Name Address City State Zip Phone #			
	Owner Signature/Other remarks /additional information/ special instructions			
Item # Action #		Item Brand Name Brand/Model/Caliber (Further Description) Serial # Where Found Weight of Narcotic	Storage Location	Disposition
		Serial # Where Found Weight of Narcotic		
	Owner's Name Address City State Zip Phone #			
	Owner Signature/Other remarks /additional information/ special instructions			

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

Incident History for: #S015117464

Initial Type: AL Initial Alarm Level: Final Alarm Level:

Loc Info:

/0943 (SP0320) ENTRY , NO FURTHER INFORMATION

/0943 (SP0166) CHANGE PRI: 2

$$\longrightarrow 3.$$

0943 VIEWED

0943 (SP0320) MISC ,LOOKING FOR HIT AND RURN SUSPECT. VEHICLE IS 20
07 HUMMER, BLACK APT3027. REGISTERED TO A ROBERT
S SIMON. DRIVER IN THE HIT AND RUN WAS A FEMALE
. MY CASE IS 15-1806

0944 MISC , DAMAGE SHOULD BE ON THE FRONT BUMPER AREA. THAN
KS MUCH

/0944 (SP0166) DISPER 3C1 #C1363 LEYDA, DEP (CHRISTOPHER)

/0949 (C1363) REMINQ 3C1 MDTVEH, APT3027,, WA,,,,,,,,,,,,,

/0954 (SP0166) ONSCNE 3C1

0955 MISC 3C1 ,NO VEH IN DRIVEWAY , KNOCKING

/1007 OK 3C1 , NFC

/1009 CHANGE PHO: --> 4253082368

/1016 MISC ,07/19/15 10:15:25 TO SPDP18 FROM C1363 ON 3C1:

1016 MISC ,CAN U PASS THIS ON TO LK STEVENS PLEASE? NO SI
GNS ANYONE IS

1016 MISC , HOME. LAST CONTACT HERE WAS IN 2009 (CASE #SO
09-19818), WHICH WAS A

1016 MISC , RES BURG. PHONE NUMBERS FOR THEM ARE: H# 4253
45-1123, C# 425 210 628

1016 MISC , 3, W# FOR ROBERT 425 347 7994. OF INTEREST, IN
THE NARRATIVE, ONE OF

1016 MISC ,THE DEPUTIES CONTACTED HIS WIFE, I BELIEVE, THOUGH SHE IS ONLY LISTED

1016 MISC , AS A "DEANNE". I ALSO NOTED IN HIS RMS THAT HE
WAS LISTED AS AN R/O I

1016 MISC , N A CRASH IN 2007...

/1016 CLEAR 3C1 D/G

/1016 CLOSE 3C1

/1707	(SP0100)	ENTRY		, AC/ NON INJ/ NON BLOCKING. HIT / RUN, VIC IN A BLK JETTA PULLED OFF TO SIDE OF RD. SUS VEH BLK HUMMER OR A FJ CRUISER TYPE LIC/ APT3027 , SUS L S NB SR 9. 2 MIN AGO
/1708		CHANGE		NAM: --> MERRILL, NATASHA, ADR: --> CELL, PHO: --> 4256288700
/1708	(JENN)	DISPER	19S13	#SS95 MINER, SGT (ROBERT)
/1708	(*****)	REMINQ	19S13	APT3027
/1708	(JENN)	REMINQ	19S13	LIC, 19S13, APT3027, , ,
/1709	(SS95)	REMINQ	19S13	MDTVEH, APT3027, , WA, , , , , , , , , ,
/1709	(SP0100)	SUPP		NAM: AZALAO, FERNANDO, PHO: 3609133364, TXT: VIC NOW CALLING IN. IS PARKED OFF THE SHOULDER OF NB LANES , VERIFIED NO INJ
/1709	(JENN)	MISC		, STATE ADV
/1716	(SS95)	*ASNCAS	19S13	\$SS15001806
/1716		REMINQ	19S13	MDTVEH, APP9358, , WA, , , , , , , , , ,
/1716		REMINQ	19S13	MDTWANT, , , , , , WA, AVALOF253KD, , , , , , , , , ,
/1729	(JENN)	CLEAR	19S13	D/H
/1729		CLOSE	19S13	

LAKE STEVENS POLICE DEPARTMENT

FOLLOW-UP / ROUTING SHEET

		CASE NUMBER	15-1806
MUST HAVE CITATION NUMBER OR SUSPECT INFO IF FORWARDING TO PROSECUTOR, COURT OR INVESTIGATIONS.		DATE	8/18/15
CITATION #	SUSPECT	DOB	
CITATION #	SUSPECT	DOB	
CITATION #	SUSPECT	DOB	

OFFICER / DETECTIVE REQUEST			
<input checked="" type="checkbox"/> ADD DOCUMENTS TO ORIGINAL FILE		<input checked="" type="checkbox"/> NO FURTHER ACTION REQUIRED	
<input type="checkbox"/> ADDITIONAL STOLEN OR RECOVERED PROPERTY SHEETS ATTACHED FOR DATA ENTRY			
<input type="checkbox"/> FORWARD FOLLOW-UP (COURT HAS OPEN FILE ON CASE)		<input type="checkbox"/> FORWARD COMPLETED COPY OF CASE	
<input type="checkbox"/> MARYSVILLE COURT	<input type="checkbox"/> SNO CO FELONY DIVISION	<input type="checkbox"/> WACIC / NCIC ENTRY FOR RECORDS	
<input type="checkbox"/> CITY PROSECUTOR	<input type="checkbox"/> JUVENILE COURT	<input type="checkbox"/> WASH STATE LIQUOR CONTROL	
<input type="checkbox"/> REVIEW FOR CHARGES	<input type="checkbox"/> CPS/DSHS <input type="checkbox"/> EVERETT <input type="checkbox"/> SKY VALLEY	<input type="checkbox"/> OTHER:	
DATE SENT:		BY:	

<input type="checkbox"/> FORWARD ORIGINAL FILE WITH THE FOLLOW-UP TO COURT	
<input type="checkbox"/> CITATION JUVENILE REFERRAL ATTACHED	
<input type="checkbox"/> SUBJECT REFERRED FOR FELONY CHARGING	
DATE SENT:	BY:

<input type="checkbox"/> PROSECUTOR FOLLOW-UP RESPONSE (ATTACH PROSECUTOR REQUEST FORM)		
<input type="checkbox"/> INVESTIGATIONS	OFFICER ASSIGNED	DUE DATE

CASE CLOSED	
<input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> ARREST MADE SENT TO COURT
<input checked="" type="checkbox"/> LACK OF INVESTIGATIVE LEADS	<input type="checkbox"/> VICTIM REQUEST

OFFICER / INVESTIGATOR	DATE SIGNED
SERGEANT APPROVAL <i>[Signature]</i>	DATE SIGNED 8/18/15

RECORDS DATA ENTRY	ADDITIONAL	PERSONS <input type="checkbox"/>	PROPERTY <input type="checkbox"/>	ARRESTS <input type="checkbox"/>
RECORDS:				DATE:

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

15-1806

State Farm



WASHINGTON INSURANCE CARD
STATE FARM

State Farm Mutual Automobile Insurance Company

INSURED SIMON, ROBERT S

MUTL
VOL

POLICY NUMBER 228 7825-06-47

EFFECTIVE

YR 2007 MAKE HUMMER

MAR 06 2015 TO SEP 06 2015

MODEL H3

VIN 5GTDN13E778115571

AGENT DOUG HAMILTON

PHONE (425)483-9522

NAIC 25178

2370-B3C

A BODILY INJURY/PROPERTY DAMAGE LIABILITY
P1 PERSONAL INJURY PROTECTION
D 100 DEDUCT COMPREHENSIVE
G 500 DEDUCT COLLISION
H, R1, U, U1

SEE REVERSE SIDE FOR ADDITIONAL COVERAGE INFORMATION

WA
USA

WASHINGTON

COMMERCIAL
DRIVER LICENSE



4d LIC# SIMONRS126Q2

DONOR ♥

1 SIMON
2 ROBERT SEAN

3 DOB 11-22-1988

4a ISS 05-11-2015

8 11233 26TH AVE SE
EVERETT WA 98208-7425

15 Sex M 16 Hgt 6-02

17 Wgt 185 18 Eyes BLU

9 Class A 9a End NONE

12 Restrictions NONE

4b Exp 11-22-2020



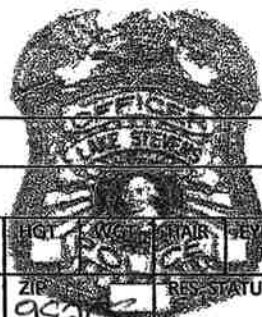
5 DD SIMONRS126Q233151312C1427

Rev 69-16-2889

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 15-1806



VICTIM / WITNESS

NON-DISCI	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	Simon, Robert Sean	White		M	11/22/88	26				
STREET ADDRESS		CITY		STATE		ZIP		RES. STATUS		
11233 26th Ave. SE		Everett		WA		98203				
HOME PHONE		CELL PHONE		PLACE OF EMPLOYMENT						
		425-355078		Clipper Seafoods						
WORK PHONE		EMAIL ADDRESS								
		ssimonr8208ss@gmail.com				(F/N Surprise)				

I, ROBERT SEAN SIMON, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

On Saturday July - 2015 I was hanging out @ my house in Marysville (4813 76th St NE Marysville, WA 98275) I was burned out from the 2-3 previous days of spent out in the sun in full swing of Summer activities. FRIDAY Night date in the evening I had run into a old friend from Grade School who had supposedly moved out of state 2 years ago and I havent heard from him in a long while. When I had left the Casino I gave Kris Struhs my cell number and said call me if your not doing anything tomorrow (SAT)

On the Morning of SAT. July 15 KRIS STRUHS AND HIS GIRLFRIEND Jordan HAD COME OVER with the intention of going out to do something TOGETHER But were for the time being just came By to hang out and "CATCH UP".

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED	LOCATION SIGNED
	7/30/15	LAKE STEVENS Police Rpt.
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED
minor	7/30/15	LK STAMS

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PAGE 1 OF 3

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-1806

NON-DISC ☐

NAME (LAST, FIRST MIDDLE)

ROBERT SEAN SIMON.

DOB

@ 11:30-12:00, I BEGAN To Relize my Day would Be nothing more than a Lazy Nap on my Couch. I offered To Kris and his Girlfriend Jordan that they were welcome to hangout as long as they wanted and to please excuse me for my exhaustion. Soon AFTER THIS TIME) KRIS HAD ASKED if they could use my truck to pick up Jordans Car At Tulalip Casino which is APPROX. 5mi - or 10 minutes one way. Being super lazy, I made a poor Decision that I had I felt more lucky, I would have decided otherwise. I allowed them to Drive only to Tulalip Casino and per nothing else, and I told them to call my cell if for any reason there was any Reason for the Plans to Change I needed to know. After they left I quickly fell asleep and was woken up By a Fishing Buddy who was staying with me During Our Best One Month Vacation Home From Dotish HARBOR. He told me he was concerned with

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:

DATE SIGNED

LOCATION SIGNED

OFFICER/NUMBER

DATE SIGNED

LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 2 OF 3

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-1806

NON-DISC

NAME (LAST, FIRST MIDDLE)

SIMON ROBERT SEAN

DOB

11/02/88

The ~~whereabouts~~ of my truck being it was nearly 7:00pm and there was no sign of them no missed calls on my cell and he had heard them ask to borrow my truck to pick up her car (TOTALIP AND THAT) WAS A/C. → After excessive attempts to call KRIS AND JORDAN AT (25) 321-6432 which is the number they only have used to contact me and I understand to be Jordans cell. When Jordan finally answered she said she was arching the Totalip Casino PARKING LOT IN HER CAR looking for KRIS to give him my keys... A scenario which was so scattered backwards and wrong from WHAT I expected from them. 45 mins after answering Jordan picked me up at the Condo then we picked up KRIS who was walking along the side of the Road off 80th St. Marysville, WA. Then went to pick up my truck which was PARKED at 155 SWABR N LK Stevens → I was never informed from them about any events during the DAY.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:

[Signature]

DATE SIGNED

7/30/15.

LOCATION SIGNED

OFFICER/NUMBER

Minor

DATE SIGNED

7/30/15

LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 3 OF 3

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 15-1806

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) MERRILL, Natasha, Rae	RACE W	ETH	SEX F	DOB 07-09-82	AGE 33	HGT 5'7"	WGT 130	HAIR BLD	EYES BLU
STREET ADDRESS 12016 29th Pl NE		CITY LK Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE Alt cell# 206-992-9507		CELL PHONE 425-628-8700			PLACE OF EMPLOYMENT Team Fitness					
WORK PHONE 425-397-8326		EMAIL ADDRESS nmerrill0709@gmail.com								

I, Natasha R. Merrill, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

While being a passenger in a vehicle driving west on Lundeen Parkway approaching hwy 9, I was in the other most turn lane about 3 cars back. I heard a loud crunch and looked to my Right. Next to us was a black Jetta with a Black Hummer connected to the bumper. I did not see the hummer hit, but I saw the woman ~~that~~ who was driving the hummer make eye contact with me put her vehicle in reverse and remove her toe hitch from the Jetta's bumper. I saw the damage to the bumper. The woman driving the hummer pulled around the Jetta and turned Right onto highway 9 going North. I saw her licence plate and texted the number to a friend so I wouldn't forget. It was APT 3027. The woman driving the hummer looked to be late Twenties early Thirtys with medium brown hair. She look very out of it... almost glazed eyes. I watched the Jetta also turn Right onto Highway 9 going North but pulled to the side of the road. I then called 911.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE <u>Natasha Merrill</u>	DATE SIGNED July 20, 2015	LOCATION SIGNED LK Stevens
OFFICER/NUMBER: M:ner	DATE SIGNED JUL 20 2015	LOCATION SIGNED LK Stevens

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JUL 20 2015

PAGE 1 OF 1



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

SUPPLEMENTAL

REPORT NO. **E443959**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **15-01806**

LOCAL AGENCY CODING **0664**

TOTAL # OF UNITS **02** OBJECT STRUCK ☐

DATE OF COLLISION **07** - **18** - **2015** TIME (2400) **1707** COUNTY # **31** MILES ☐ N ☐ E ☐ IN ☒ S ☐ W ☐ OF **0664** CITY #

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐
LUNDEEN PARWAY BLOCK NO. ☐ MILE POST ☐

DISTANCE ☐ MILES ☐ N ☐ E ☐ OF (REFERENCE OR CROSS STREET) **STATE ROUTE 9**
☐ FEET ☐ S ☐ W ☐

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **UNKNOWN** FIRST NAME ☐ MIDDLE INITIAL ☐

STREET NEW ADDRESS ☐

CITY ☐ ST ☐ ZIP ☐

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # ☐ STATE ☐ SEX **U** D.O.B. ☐ - ☐ - ☐

ON DUTY ☐ STATUS ☐ AIRBAG **9** RESTR. **9** EJECT **1** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # **APT3027** STATE **WA** VIN# **5GTDN13E778115571**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2007** MAKE **HUMM** MODEL **HUM4D** STYLE **UT** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **ROBERT SIMON 11233 26 AVE SE EVERETT WA 98298**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **STATE FARM 228 7825-C06-47 EXPIRES 9-6-15**

VEHICLE LEGALLY STANDING YES ☒ NO ☐ CITATION # ☐ CHARGE ☐



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 3609133364**

LAST NAME **AVALOS** FIRST NAME **FERNANDO** MIDDLE INITIAL **C**

STREET NEW ADDRESS ☒ **2506 HARTFORD DR #3**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **AVALOF*253KD** STATE **WA** SEX **M** D.O.B. **05** - **04** - **1975**

ON DUTY ☐ STATUS ☐ AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE ☐ INJURY CLASS **7** NATURE OF INJURIES **SORE BACK**

LICENSE PLATE # **APP9358** STATE **WA** VIN# **3VWSA29MXYM192749**

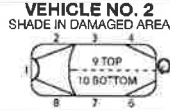
TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2000** MAKE **VOLK** MODEL **JETTA** STYLE **SD** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **OWNED BY DRIVER**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **ALLSTATE 987206004 EXP: 8-19-15**

VEHICLE LEGALLY STANDING YES ☒ NO ☐ CITATION # ☐ CHARGE ☐



OFFICER'S NAME (PRINT) **ROBERT MINER** BADGE OR ID # **095** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E443959**

CASE # **15-01806**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		VELAZQUES SARA T																
ADDRESS & PHONE #		2506 HARTFORD DR #3 LAKE STEVENS WA 98258																
		SEX	F	D.O.B. MMDDYYYY	10	21	1988											
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	0	NATURE OF INJURIES PREGNANT-AID DECLINED
NAME (LAST, FIRST, MIDDLE INITIAL)		AVALOS JAMIE																
ADDRESS & PHONE #		2506 HARTFORD DR #3 LAKE STEVENS WA 98258																
		SEX	F	D.O.B. MMDDYYYY	07	04	2007											
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	9	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		MERRILL NATASHA R																
ADDRESS & PHONE #		12016 29 PL NE LAKE STEVENS WA 98258 4256288700																
		SEX	F	D.O.B. MMDDYYYY	07	09	1982											
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit #2 was stopped at the red light on Lundeen at SR 9 in the straight through lane to continue on Lundeen. Witness was stopped at the redlight on Lundeen at SR 9 in the left turn lane, directly to the left of Unit #2. Unit #1 was westbound on Lundeen approaching the red light at SR 9. Unit #1 rear ended Unit #1. Immediately following the collision, the female driver of Unit #1 backed up and fled the scene northbound on SR 9 fialing to stop and exchange info with Unit #2. As of completing this report, 7-19-15, I have not been able to locate the hit and run vehicle along with its driver. This case is active.

Follow up: 8-18-15. I was able to contact the owner of the Unit #1 and obtained his insurance information. This information was added to this report. He also stated he let a friend borrow his car, Kris Struhs. This lead me to Struhs girlfriend, Jordan N. Nicole Yocum. On 8-18-15, I was finally able to contact Yocum who stated she never drove Unit #1 and she has her own vehicle. The night before the collision, Owner of Unit #1 was seen by Kris and Jordan giving his keys to an unknown female. At this time, the driver of Unit #1 can not be identified. The owner of Unit #2 was contacted and briefed. This case is now closed.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

ROBERT MINER

08-18-15 10:26 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

ROBERT MINER 095

8/18/2015 10:27:07 AM

BADGE OR ID #	095	ORI #	WA0311900	TIME POLICE DISPATCHED	5:08 PM	TIME POLICE ARRIVED	5:10 PM
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E443959**

CASE # **15-01806**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		YOCUM JORDAN N																	
ADDRESS & PHONE #		326 RHODORA HEIGHTS RD LAKE STEVENS WA 98258 4253276432																	
		SEX	F	D.O.B.	MMDDYYYY	06			26	1988									
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
		SEX		D.O.B.	MMDDYYYY														
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
		SEX		D.O.B.	MMDDYYYY														
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

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ROBERT MINER 095

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BADGE OR ID #	095	ORI #	WA0311900	TIME POLICE DISPATCHED	5:08 PM	TIME POLICE ARRIVED	5:10 PM
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